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|---|------------------------|-------------------------------------|
| UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.33(b))</i> | Attorney Docket No. | 3896-030965 (P-6015) |
| | First Inventor | Dimitrios Manoussakis |
| | Title | Non-Evacuated Blood Collection Tube |
| | Express Mail Label No. | EL738801169US |

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| APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i> | ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450 |
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| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages 24] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 11] 5. Oath or Declaration [Total Pages 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>for continuation/divisional with Box 18 completed</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies |
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ACCOMPANYING APPLICATION PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☒ Power of Attorney
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement ☐ Copies of IDS
 (IDS)/PTO-1449 Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).
 Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other: _____

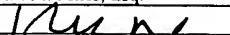
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: ____/____

Prior application information: Examiner _____ Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

| | | |
|--|---|--|
| <input checked="" type="checkbox"/> Customer Number: | 28289 (Insert Customer No. or Attach bar code label here) | OR <input type="checkbox"/> Correspondence address below |
| Name | Kirk M. Miles, Esq. Webb Ziesenheim Logsdon Orkin & Hanson, P.C. | |
| Address | 700 Koppers Building 436 Seventh Avenue | |
| City | Pittsburgh | State PA Zip Code 15219 |
| Country | United States | Telephone 412-471-8815 Fax 412-471-4094 |
| Name (Print/Type) | Kirk M. Miles, Esq. | Registration No. (Attorney/Agent) 37,891 |
| Signature |  | Date September 22, 2003 |

sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

{W0081483.1}

22240 U.S. PTO

10/667920



09/22/03

PATENT APPLICATION TRANSMITTAL LETTER

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Transmitted herewith for filing is the patent application of: Dimitrios Manoussakis

Entitled: "Non-Evacuated Blood Collection Tube"

Small Entity Status:

- ☐ Small Entity Statement under 37 CFR 1.27 is enclosed
☐ Small Entity Status is asserted for this application under 37 CFR 1.27

Enclosed are: ☒ 11 sheets of drawings
☒ An Assignment of the invention to: Becton, Dickinson And Company
☒ Declaration
☐ Non-Publication Request Under 37 C.F.R. §1.213

CLAIMS AS FILED

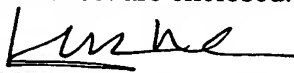
| | <u>No. Filed</u> | <u>No. Extra</u> | <u>Small Entity Rate</u> | <u>Non-Small Entity Rate</u> | <u>Charge</u> |
|----------------------------|------------------|------------------|----------------------------------|--------------------------------------|-------------------|
| Total | | | | | |
| Claims | <u>40</u> | <u>-20 = 20</u> | x \$ 9.00 | x \$ 18.00 | \$ <u>360.00</u> |
| Indep. | | | | | |
| Claims | <u>4</u> | <u>-3 = 1</u> | x \$ 42.00 | x \$ 84.00 | \$ <u>84.00</u> |
| Multiple Dependent Claim/s | | | + \$140.00 | + \$280.00 | \$ <u></u> |
| Basic Fee | | | + \$375.00 | + \$750.00 | \$ <u>750.00</u> |
| | | | Total of above Charges | | \$ <u>1194.00</u> |
| | | | Total Fee | | \$ <u>1194.00</u> |

Checks in the amounts of \$40.00 and 1194.00 are enclosed to cover the filing fee and assignment recordation.

The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 CFR 1.16 or patent application processing fees under 37 CFR 1.17 associated with this communication to Deposit Account No. 23-0650. Please refund any overpayment to Deposit Account No. 23-0650.

An original and two copies of this sheet are enclosed.

September 22, 2003
Date

By 

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PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF:

ATTORNEY'S DOCKET NUMBER

Dimitrios Manoussakis

3896-030965 (P-6015)

ENTITLED

"NON-EVACUATED BLOOD COLLECTION TUBE"

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

EXPRESS MAIL CERTIFICATE

"Express Mail" Label Number **EL738801169US**

Date of Deposit **September 22, 2003**

I hereby certify that the following attached paper or fee

**PATENT APPLICATION TRANSMITTAL LETTER (original and two (2) copies);
SPECIFICATION (16 pp.);
CLAIMS (7 pp.);
ABSTRACT (1 p.);
DRAWINGS (11 Sheets);
UTILITY TRANSMITTAL SHEET (1 p.);
ASSIGNMENT (2 pp.);
ASSIGNMENT RECORDATION SHEET (1 p.);
DECLARATION AND POWER OF ATTORNEY (2 pp.);
POSTCARD;
AND CHECKS IN THE AMOUNTS OF \$40.00 AND \$1,194.00**

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above and is addressed to the Commissioner for Patents, Alexandria, VA 22313-1450.

Michelle Pichora

(Typed name of person mailing paper or fee)

Michelle Pichora

(Signature of person mailing paper or fee)